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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/647,038	08/22/2003	Steve Savitz	2007P07420 US	1665
28524 7590 02/09/2009 SIEMENS CORPORATION INTELLECTUAL PROPERTY DEPARTMENT 170 WOOD AVENUE SOUTH ISELIN, NJ 08830				
EXAMINER				
MORGAN, ROBERT W				
ART UNIT		PAPER NUMBER		
3626				
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

10/647,038

Applicant(s)

SAVITZ ET AL.

Examiner

ROBERT W. MORGAN

Art Unit

3626

Period for Reply -- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 11/17/08.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-14 and 16-19 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-14 and 16-19 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☐ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO-8508)
Paper No(s)/Mail Date _____

- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date _____
- 5) ☐ Notice of Informal Patent Application
- 6) ☐ Other: _____

DETAILED ACTION

Notice to Applicant

1. This communication is in response to the amendment filed 11/17/08, the following has occurred: Claims 1-3, 5, 7, 8, 12-14 and 17 have been amended and claim 15 has been canceled. Now claims 1-14 and 16-19 are presented for examination.

Claim Rejections - 35 USC § 102

2. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

Claims 1-14 and 16-19 are rejected under 35 U.S.C. 102(b) as being anticipated by U.S. Patent No. 4,857,716 to Gombrich et al.

As per claim 1, Gombrich et al. teaches a system for managing information relating to a patient in a hospital environment comprising:

--the claimed plurality of information processing systems including a laboratory information system for processing data related to performing, tracking and managing laboratory tests and a pharmacy information system for processing data related to performing, tracking and managing pharmacy tasks and usable by a pharmacist, for processing information relating to a patient, each of said plurality of information processing systems being associated with respective department in a hospital responsible for implementing a particular a hospital function is met by the computer system (42, Fig. 1) including terminals (45, Fig.1) which are located at remote locations within the hospital such as the pharmacy, laboratory, supply room, radiology and

billing departments (see: column 8, lines 23-30). In addition, Gombrich et al. teaches computer system (42, Fig. 13) that includes multiple communication processors utilized to provide sufficient throughput during a communication period (see: column 12, lines 35-42);

[--the claimed portable data terminal for receipt and transmission of said information relating to said patient is met by the portable bar code reading device (48, Fig. 1) used to read and transmit information on a patient's identification bracelet (52, Fig. 3) (see: column 8, lines 56-63);] and

--the claimed control server in communication with each of said plurality of information processing systems and for managing department specific patient related information is met by the network operating system, which is usually installed on a server in a local area network, that allows user to interactively access files through a distributed file system server and virtual terminal server using high level communication protocols to ease the networking to other parts of the hospital system (see: column 12, lines 52-60 and Fig. 14).

--the claimed portable data terminal enabling bidirectional communication between said portable data terminal and said laboratory information system and said pharmacy information system via said control server, said portable data terminal receiving data representing at least one healthcare task to be performed on said patient and laboratory test result information from said laboratory information system and medication related information from said pharmacy information system for display on said portable data terminal useable by a healthcare professional and conveying test and medication administration related data input using said portable data by a user to said laboratory system and pharmacy information system is met by the use of numerous terminals (45a, 45b, 45c, Fig. 15) and a portable bar code reading device (48,

Fig. 1) that communicates with the computer system (42, Fig. 1) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: column 9, lines 41 to column 10, lines 18 and column 12, lines 52-60). In addition, Gombrich et al. teaches that interaction with user is provided by liquid crystal display (LCD) (see: column 5, lines 61-63 and column 18, lines 66 to column 19, lines 2).

As per claim 2, Gombrich et al. teaches the claimed wherein said laboratory information system and said pharmacy information system are in integrated bidirectional communication with said portable data terminal, said plurality of information processing systems comprising hospital information systems, pharmacy information systems, radiology information systems and accounting information systems is met by the computer system (42, Fig. 1) including terminals (45, Fig.1) which are located at remote locations within the hospital such as the pharmacy, laboratory, supply room, radiology and billing departments (see: column 8, lines 23-30). In addition, Gombrich teaches the use of numerous terminals (45a, 45b, 45c, Fig. 15) and a portable bar code reading device (48, Fig. 1) that communicates with the computer system (42, Fig. 1) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: column 9, lines 41 to column 10, lines 18 and column 12, lines 52-60), and

--the claimed said healthcare task includes at least one medication administration event, a test conducted on a patient, specimen collection and a billing process (see: column 8, lines 15-30).

As per claims 3-6, Gombrich et al. teaches the use of numerous terminals (45a, 45b, 45c, Fig. 15) and a portable bar code reading device (48, Fig. 1) that communicates with the computer system (42, Fig. 1) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: column 9, lines 41 to column 10, lines 18 and column 12, lines 52-60).

As per claim 7, Gombrich et al. teaches the claimed a bar code scanner for reading identification information from a patient identification code for use in associating a patient identifier with at least one of (a) test information being conveyed to said laboratory information system and (b) medication related information to said pharmacy information system is met by the portable bar code reading device (48, Fig. 1) used to read and transmit information on a patient's identification bracelet (52, Fig. 3) (see: column 8, lines 56-63). In addition, Gombrich et al. teaches a bar code reading device (48, Fig. 1) that processes information regarding a patient blood sample after scanning the patient's identification bar code (see: column 15, lines 49-57);

--the claimed printer for printing a corresponding information label including information read by said bar code scanner and conveyed to said laboratory information system and said pharmacy information system (see: column 8, lines 15-30); and

a microprocessor electrically coupled to said bar code scanner and said printer for storing data relating to said identification information and said printed information label and communicating said at least one of (a) test information being conveyed to said laboratory information system and (b) medication related information to said pharmacy information system for automatic integration into a patient record is met by microprocessor (110, Fig. 10) and printer

(115, Fig. 10) used to store data and print label information which can be transmitted to a plurality of information systems through said control server (see: column 11, lines 6-58 and Fig. 10).

As per claim 8, Gombrich et al. teaches the claimed information and medication related information associated with said patient and communicated by said microprocessor to said laboratory information system and pharmacy information system is used in determining a healthcare task to be performed on said patient and said microprocessor receives data representing said determined task for display on said portable data terminal. This limitation is met by the microprocessor (110, Fig. 10) and printer (115, Fig. 10) used to store data and print label information which can be transmitted to a plurality of information systems through said control server (see: column 11, lines 6-58 and Fig. 10).

As per claim 9, Gombrich et al. teaches the claimed plurality of information processing systems are in communication with each other through said control server. This limitation is met by the numerous terminals (45a, 45b, 45c, Fig. 15) that are located at remote locations within the hospital such as the pharmacy, laboratory, supply room, radiology and billing departments and a portable bar code reading device (48, Fig. 1) that communicates with the computer system (42, Fig. 1) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: column 8, lines 23-30, column 9, lines 41 to column 10, lines 18 and column 12, lines 52-60 and Fig. 15).

As per claim 10, Gombrich et al. teaches the claimed portable data terminal is capable of periodic communication with said control server for intermittent interfacing with said plurality of

information processing systems for receiving said information relating to said patient from said plurality of information processing systems through said control server and for transferring data relating to said patient from said portable data terminal to said plurality of information processing systems through said control server. These feature are met by the numerous terminals (45a, 45b, 45c, Fig. 15) that are located at remote locations within the hospital such as the pharmacy, laboratory, supply room, radiology and billing departments and a portable bar code reading device (48, Fig. 1) that communicates with the computer system (42, Fig. 1) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: column 8, lines 23-30, column 9, lines 41 to column 10, lines 18 and column 12, lines 52-60 and Fig. 15).

As per claim 11, Gombrich et al. teaches the claimed periodic communication is established through radio frequency communication (see: column 9, lines 7-13).

As per claim 12, Gombrich et al. teaches a system for managing sample collection information and medication information relating to a patient in a hospital environment comprising:

--the claimed laboratory information processing system for processing said sample collection information relating to a patient for use in determining at least one healthcare task to be performed on said patient is met by the bar code reading device (48, Fig. 1) that processes information regarding a patient blood sample after scanning the patient's identification bar code (see: column 15, lines 49-57);

--the claimed pharmacy information processing system for processing said medication information relating to said patient for use in determining at least one healthcare task to be performed on said patient is met by the bar code reading device (48, Fig. 1) that processes information regarding a patient prescription after scanning the patient's identification bar code (see: column 13, lines 32-61);

--the claimed control server enabling bidirectional communication with said laboratory information processing system, said pharmacy information processing system and a portable data terminal, said portable data terminal being for managing and displaying said sample collection information and said medication information relating to said patient received by said portable data terminal and including said at least one healthcare task to be performed on said patient including collecting a sample from said patient and administering medication to said patient is met by the Lab Terminal (45d, Fig. 15), Pharmacy terminal (45c, Fig. 15) and the bar code reading device (48, Fig. 15) that communicate with the computer system (42, Fig. 15) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: Fig. 15);

--the claimed periodically communicating with said control server for intermittent interfacing with said laboratory information processing system for receiving said sample collection information relating to said patient and with said pharmacy information processing system for receiving said medication information relating to said patient is met by the change of the duty cycles or periodicity of signal containing administering of drugs, taking vital signs, etc

to enable more rapid patient identification and better system response time (see: column 19, lines 21-37 and column 21, lines 25-29),

--the claimed enabling input of data including sample collection data and medication administration data by a healthcare professional at a patient bedside (see: column 15, lines 49-57), and

--the claimed transferring sample collection data relating to said patient taken in response to said sample collection information from said portable data terminal to said laboratory information system and medication data relating to said patient administered in response to said medication information from said portable data terminal to said pharmacy information system for incorporation into a patient record is met by the Lab Terminal (45d, Fig. 15), Pharmacy terminal (45c, Fig. 15) and the bar code reading device (48, Fig. 15) that communicate with the computer system (42, Fig. 15) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: Fig. 15).

As per claim 13, Gombrich et al. the claimed wherein said healthcare task includes any of (a) blood collection, (b) collection of patient information, (c) confirmation of sampling of patient specimens, (d) antibiotic distribution, (e) conducting tests, and (f) administration of medicine is met by the Lab Terminal (45d, Fig. 15), Pharmacy terminal (45c, Fig. 15) and the bar code reading device (48, Fig. 15) that process information regarding a patient's blood sample or prescription after scanning the patient's identification bar code (see: column 13, lines 32-61, column 15, lines 49-57 and Fig. 15).

As per claims 14 and 16, Gombrich et al. teaches the use of numerous terminals (45a, 45b, 45c, Fig. 15) that are located at remote locations within the hospital such as the pharmacy, laboratory, supply room, radiology and billing departments and a portable bar code reading device (48, Fig. 1) that communicates with the computer system (42, Fig. 1) using a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14) (see: column 8, lines 23-30, column 9, lines 41 to column 10, lines 18 and column 12, lines 52-60 and Fig. 15). The computer system (42, Fig. 15) collects the data received from various terminals and stores the data in various patient/item files for later use (see: column 12, lines 48-51). In addition, Gombrich et al. also teaches that the portable bar code reading device (48, Fig. 1) is used to read and transmit information on a patient's identification bracelet (52, Fig. 3) (see: column 8, lines 56-63). Furthermore, Gombrich et al. teaches a Lab Terminal (45d, Fig. 15), Pharmacy terminal (45c, Fig. 15) and the bar code reading device (48, Fig. 15) that process information regarding a patient's blood sample or prescription after scanning the patient's identification bar code (see: column 13, lines 32-61, column 15, lines 49-57 and Fig. 15).

As per claims 17-19, Gombrich et al. teaches a computer system (42, Fig. 15) that communicates with a Lab Terminal (45d, Fig. 15), Pharmacy terminal (45c, Fig. 15) and a bar code reading device (48, Fig. 15). The bar code reading device reads and transmits information stored on a patient's identification bracelet (52, Fig. 3) regarding a patient's blood sample or prescription after scanning the patient's identification bar code (see: column 13, lines 32-61, column 15, lines 49-57 and Fig. 15). Additionally, Gombrich et al. teaches a computer system

(42, Fig 15) that uses a network operating system (Fig. 14), which is usually installed on a server in a local area network, allowing users to interactively access files through a distributed file system server (Fig. 14) and virtual terminal server (Fig. 14). The computer system (42, Fig. 15) also collects and coordinates data received from the various terminals and stores the data in various patient/item files for later use (see: column 8, lines 56-63 and column 12, lines 48-51). Furthermore, Gombrich et al. teaches a Lab Terminal (45d, Fig. 15), Pharmacy terminal (45c, Fig.15) and the bar code reading device (48, Fig. 15) that process information regarding a patient's blood sample or prescription after scanning the patient's identification bar code (see: column 13, lines 32-61, column 15, lines 49-57 and Fig. 15).

Response to Arguments

3. Applicant's arguments filed 11/17/08 have been fully considered but they are not persuasive. Applicant's arguments will be addressed hereinbelow in the order in which they appear in the response filed 11/17/08.

In response to Applicant arguments, it is respectfully submits that the Examiner has applied new passage and citation to the amended claims 1-3, 5, 7, 8, 12-14 and 17 at the present time. As such, Applicant's remarks with regard to the application of Gombrich to the amended claims are addressed in the above Office Action.

Conclusion

THIS ACTION IS MADE FINAL. Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO

MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to ROBERT W. MORGAN whose telephone number is (571)272-6773. The examiner can normally be reached on 9:00 a.m. - 5:30 p.m. Mon - Fri.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, C. Luke Gilligan can be reached on (571) 272-6770. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Robert Morgan/

Art Unit: 3626

Primary Examiner, Art Unit 3626